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Intellectual Property Law

FAX TRANSMITTAL

To:	Office of Initial Patent Examination's Filing Receipt Corrections	From:	Jeffrey W. Smith
Company:	USPTO	Pages:	4
Fax:	703-746-9195	Date:	Tuesday, May 25, 2004
Re:	Application No. 10/786,209		

Comments:

University Research Park, 440 Science Drive, Suite 302, Madison, Wisconsin 53711
Phone: 608-663-8200 Facsimile: 608-663-8207

PTO/SB/21 (02-04)
Approved for use through 07/31/2006, OMB 0651-0031
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TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	10786209
	Filing Date	February 25, 2004
	First Named Inventor	Alexandro Doe
	Art Unit	1617
	Examiner Name	
Total Number of Pages in This Submission	Attorney Docket Number	10004512

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Request for Correction of Filing Receipt (1p)
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Jeffrey W. Smith, Reg. No. 33455
Signature	<i>Jeffrey W. Smith</i>
Date	May 25, 2004

CERTIFICATE OF TRANSMISSION/MAILING		
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Typed or printed name	Jeffrey W. Smith, Reg. No. 33455	
Signature	<i>Jeffrey W. Smith</i>	Date May 25, 2004

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PATENT APPLICATION

In the United States Patent and Trademark Office

Applicant: Dec et al.
Docket No.: 10004.512
Date: May 25, 2004
Application No.: 10/786,209
Filed: February 25, 2004
Art Unit: 1617
Examiner:
For: FATTY ACID ANTIMICROBIAL

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On May 25, 2004Signature Jeffrey W. Smith

Jeffrey W. Smith, Reg. No. 33455
Name of Applicant, assignee or
Registered Representative

REQUEST FOR CORRECTION IN FILING RECEIPT

Attn: Office of Initial Patent Examination's Filing Receipt Corrections
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Applicants for the above-referenced application hereby request that a correction be made to the first applicant's name. The spelling should be "Alejandro" as noted on the attached filing receipt.

If there are any questions regarding this request, please contact Applicants' attorney at the number listed below.

Respectfully submitted,

Jeffrey W. Smith
Jeffrey W. Smith, Reg. No. 33455
Attorney for Applicant
SMITH & AMUNDSEN
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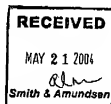


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APPL NO.	FILING OR 371 (c) DATE	ART UNIT	FILE REC'D	ATTY DOCKET NO	DRAWINGS	TOT CLMS	IND CLMS
10/786,209	02/25/2004	1617	1086	10004.512		28	5

39231
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MADISON, WI 53711



CONFIRMATION NO. 3041

FILING RECEIPT

OC000000012659514

Date Mailed: 05/18/2004

Receipt is acknowledged of this regular Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Filing Receipt Corrections, facsimile number 703-746-9195. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Alejandro Dee, Roselle, IL;
Charles Gradle, Berwyn, IL;

ALEJANDRO

Domestic Priority data as claimed by applicant

This application is a CON of 08/602,498 02/20/1996 PAT 6,699,907

Foreign Applications

If Required, Foreign Filing License Granted: 05/17/2004

Projected Publication Date: 08/26/2004

Non-Publication Request: No

Early Publication Request: No

Title

Fatty acid antimicrobial

Preliminary Class